

Application Data Sheet

Application Information

Application number::
Filing Date:: November 19, 2003
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??:
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: EXPANSILE DEVICE FOR USE IN BLOOD
VESSELS AND TRACTS IN THE BODY AND
METHOD
Attorney Docket Number:: 021872-001010US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure:: 11E
Total Drawing Sheets:: 7
Small Entity?:: Yes
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type: Inventor
Primary Citizenship Country: US
Status: Full Capacity
Given Name: Gordon
Middle Name: H.
Family Name: Epstein
Name Suffix:
City of Residence: Fremont
State or Province of Residence: CA
Country of Residence: US
Street of Mailing Address: 135 Kootenai Drive
City of Mailing Address: Fremont
State or Province of mailing address: CA
Country of mailing address: US
Postal or Zip Code of mailing address: 94539

Applicant Authority Type: Inventor
Primary Citizenship Country: US
Status: Full Capacity
Given Name: Todd
Middle Name: E.
Family Name: Lempert
Name Suffix:
City of Residence: Piedmont
State or Province of Residence: CA
Country of Residence: US
Street of Mailing Address: 244 Scenic Avenue
City of Mailing Address: Piedmont

State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94611

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Brian
Middle Name:: B.
Family Name:: Martin
Name Suffix::
City of Residence:: Boulder Creek
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 315 Alder Drive
City of Mailing Address:: Boulder Creek
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 95006

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: David
Middle Name:: M.
Family Name:: Taylor
Name Suffix::
City of Residence:: Fremont
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 38396 Redwood Terrace

City of Mailing Address:: Fremont
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94536

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Richard
Middle Name:: M.
Family Name:: Romley
Name Suffix::

City of Residence:: Alameda
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1205 Benton Street, Apt. 1
City of Mailing Address:: Alameda
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94501

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Zia
Middle Name::
Family Name:: Yassinzadeh
Name Suffix::
City of Residence:: San Jose
State or Province of Residence:: CA
Country of Residence:: US

Street of Mailing Address:: 11240 Mt. Hamilton Rd.
City of Mailing Address:: San Jose
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 95140

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Glenn
Middle Name::
Family Name:: Foy
Name Suffix::

City of Residence:: Pleasanton
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 7824 Foothill Knolls Drive
City of Mailing Address:: Pleasanton
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94588

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	10/272,508	10/15/02
10/272,508	Continuation	09/528,574	03/20/00
09/528,574	Continuation-in-part of	09/241,680	02/01/99
09/241,680	Continuation-in-part of	08/972,383	11/18/97
08/972,383	Continuation-in-part of	08/798,870	02/11/97

Foreign Priority Information

Country::	Application number::	Filing Date::
-----------	----------------------	---------------

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::